



**Health Care Plans
Employee Monthly Contribution Rates
Effective January 1, 2018**

Plan	Single	Single+1	Family
BCBSIL PPO	\$173	\$334	\$620
BCBS HMO Blue Advantage	\$122	\$238	\$316
Delta Dental PPO	\$11	\$22	\$36
EyeMed Vision	\$6.27	\$11.93	\$17.51

Should you have any questions regarding the contributions or benefit plans, contact Employee Benefits:

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